



GOVERNOR'S
COUNCIL
ON PHYSICAL
ACTIVITY & HEALTH

January 2007

Dear Physical Activity Enthusiast:

The New Hampshire Governor's Council on Physical Activity and Health, on behalf of Governor John Lynch, is pleased to announce the Council's Outstanding Achievement Awards for Physical Activity and Health. The award winners will be recognized by Governor Lynch at the Healthy Bodies, Healthy Minds, Healthy Schools Celebration at the Hampshire Dome (Milford, NH) on May 31st.

We are seeking nominations of individuals and groups in New Hampshire that have accomplished outstanding achievements in promoting healthy lifestyles through physical activity and fitness services and programs.

The award categories are:

Senior (Older Adults) Organizations and/or Individuals
Work Sites/Employers
Disability Related Organizations and/or Individuals
Youth Related Organizations and/or Individuals
Community (Town/City) Organizations
Schools

Please consider an individual and/or group that are making a difference in New Hampshire's health. Please share this application packet with others that may be interested in nominating an individual and/or group.

Attached is a nomination application. Please complete the application and send it to:

Fred Daniels
CPTe Health Group
P.O. Box 6249
Nashua, NH 03063

Deadline for submission: April 1, 2007

Winners will be notified in late April

For more information, please contact Fred Daniels via e-mail (fdaniels@cpte.net) or phone (880-0448).

Thank you for supporting healthy lifestyles and taking part in this nomination process.



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Outstanding Achievement Awards Nomination Application

Contact Name: _____

Mailing Address: _____

City: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

Fax: _____ E-Mail: _____

Organization Name: _____

Address: _____

City: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

Fax: _____ E-Mail: _____

Nominated by (if applicable)

Name: _____

Mailing Address: _____

City: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

Fax: _____ E-Mail: _____

Relationship to Nominee: _____

Achievement/Program being nominated:

Category of Nomination (check the most appropriate category)

☐ Senior (Older Adults) Organizations and/or Individuals

☐ Work Sites/Employers

☐ Disability Related Organizations and/or Individuals

☐ Youth Related Organizations and/or Individuals

☐ Community (Town/City) Organizations

☐ Schools

☐ Other: _____

Description of Achievement (separate pages may be used):

Scope of Impact:

Collaborative Achievements:

Measurable Outcomes:

Please attach up to three (3) letters of support and/or supporting materials (i.e. brochures, articles, promotional materials, photographs, etc.)